

Fill in this information to identify your case:

United States Bankruptcy Court for the:

Eastern District of Texas

Case number (If known): _____ Chapter you are filing under:



Chapter 7



Chapter 11



Chapter 12



Chapter 13

☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

About Debtor 1:

Terrence

First name

Peter

Middle name

Martin

Last name

Suffix (Sr., Jr, II, III)

About Debtor 2 (Spouse Only in a Joint Case):

Jinja

First name

Delight

Middle name

Martin

Last name

Suffix (Sr., Jr, II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names and any assumed, trade names and *doing business as* names.

Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.

First name

Middle name

Last name

Business name (if applicable)

Business name (if applicable)

Jinja

First name

Delight

Middle name

Cotten

Last name

Business name (if applicable)

Business name (if applicable)

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx - xx - 7 5 8 5

OR

9xx - xx - ____ ____ ____ ____

xxx - xx - 0 6 2 8

OR

9xx - xx - ____ ____ ____ ____

Debtor 1	Terrence	Peter	Martin
Debtor 2	Jinja	Delight	Martin
	First Name	Middle Name	Last Name

Case number (if known) _____

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

4. Your Employer Identification Number (EIN), if any.

EIN _____

EIN _____

EIN _____

EIN _____

5. Where you live

4576 Belfort Place

Number Street

Dallas, TX 75205

City State ZIP Code

Dallas

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

If Debtor 2 lives at a different address:

Number Street

City State ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☒ I have another reason. Explain.
(See 28 U.S.C. § 1408)

This forum is both convenient and cost-effective

for the Debtors.

Check one:

☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☒ I have another reason. Explain.
(See 28 U.S.C. § 1408)

This forum is both convenient and cost-effective

for the Debtors.

Debtor 1	Terrence	Peter	Martin
Debtor 2	Jinja	Delight	Martin
	First Name	Middle Name	Last Name

Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.*

- ☒ Chapter 7
☐ Chapter 11
☐ Chapter 12
☐ Chapter 13

8. **How you will pay the fee**

- ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. **Have you filed for bankruptcy within the last 8 years?**

- ☒ No.
- ☐ Yes. District _____ When _____ Case number _____
MM / DD / YYYY
- District _____ When _____ Case number _____
MM / DD / YYYY
- District _____ When _____ Case number _____
MM / DD / YYYY

10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?**

- ☒ No.
- ☐ Yes. Debtor _____ Relationship to you _____
District _____ When _____ Case number, if known _____
MM / DD / YYYY
- Debtor _____ Relationship to you _____
District _____ When _____ Case number, if known _____
MM / DD / YYYY

11. **Do you rent your residence?**

- ☒ No. Go to line 12.
- ☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1	Terrence	Peter	Martin	
Debtor 2	Jinja	Delight	Martin	
	First Name	Middle Name	Last Name	Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

☒ No. Go to Part 4.

☐ Yes. Name and location of business

Name of business, if any

Number Street

City

State

ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a *small business debtor* or a debtor as defined by 11 U.S.C. § 1182(1)?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☒ No. I am not filing under Chapter 11.

☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.

☐ Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

Debtor 1
Debtor 2

Terrence
Jinja
First Name

Peter
Delight
Middle Name

Martin
Martin
Last Name

Case number (if known) _____

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

☒ No.

☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number Street

City State ZIP Code

Debtor 1	Terrence	Peter	Martin
Debtor 2	Jinja	Delight	Martin
	First Name	Middle Name	Last Name

Case number (if known) _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1	Terrence	Peter	Martin	
Debtor 2	Jinja	Delight	Martin	
	First Name	Middle Name	Last Name	Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes

- 16. What kind of debts do you have?**
- 16a. **Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
- ☒ No. Go to line 16b.
☐ Yes. Go to line 17.
- 16b. **Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.
- ☐ No. Go to line 16c.
☒ Yes. Go to line 17.
- 16c. State the type of debts you owe that are not consumer debts or business debts.

- 17. Are you filing under Chapter 7?** ☐ No. I am not filing under Chapter 7. Go to line 18.
☒ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
☒ No
☐ Yes
- 18. How many creditors do you estimate that you owe?**
- ☒ 1-49 ☐ 1,000-5,000 ☐ 25,001-50,000 ☐ 50,000-100,000 ☐ More than 100,000
☐ 50-99 ☐ 5,001-10,000
☐ 100-199 ☐ 10,001-25,000
☐ 200-999
- 19. How much do you estimate your assets to be worth?**
- ☐ \$0-\$50,000 ☒ \$1,000,001-\$10 million ☐ \$500,000,001-\$1 billion
☐ \$50,001-\$100,000 ☐ \$10,000,001-\$50 million ☐ \$1,000,000,001-\$10 billion
☐ \$100,001-\$500,000 ☐ \$50,000,001-\$100 million ☐ \$10,000,000,001-\$50 billion
☐ \$500,001-\$1 million ☐ \$100,000,001-\$500 million ☐ More than \$50 billion
- 20. How much do you estimate your liabilities to be?**
- ☐ \$0-\$50,000 ☒ \$1,000,001-\$10 million ☐ \$500,000,001-\$1 billion
☐ \$50,001-\$100,000 ☐ \$10,000,001-\$50 million ☐ \$1,000,000,001-\$10 billion
☐ \$100,001-\$500,000 ☐ \$50,000,001-\$100 million ☐ \$10,000,000,001-\$50 billion
☐ \$500,001-\$1 million ☐ \$100,000,001-\$500 million ☐ More than \$50 billion

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Terrence Peter Martin
 Terrence Peter Martin, Debtor 1
 Executed on 12/21/2023
 MM/ DD/ YYYY

X /s/ Jinja Delight Martin
 Jinja Delight Martin, Debtor 2
 Executed on 12/21/2023
 MM/ DD/ YYYY

Debtor 1
Debtor 2

Terrence
Jinja
First Name

Peter
Delight
Middle Name

Martin
Martin
Last Name

Case number (if known) _____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

X

/s/ Michael S. Mitchell

Signature of Attorney for Debtor

Date **12/21/2023**

MM / DD / YYYY

Michael S. Mitchell

Printed name

DeMarco Mitchell, PLLC

Firm name

500 N. Central Expressway Suite 500

Number Street

Plano

City

TX

State

75074

ZIP Code

Contact phone **(972) 578-1400**

Email address **mike@demarcomitchell.com**

00788065

Bar number

TX

State

Fill in this information to identify your case and this filing:

Debtor 1	Terrence	Peter	Martin
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Jinja	Delight	Martin
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of Texas			
Case number _____			

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
☒ Yes. Where is the property?

1.1 **Homestead**

Street address, if available, or other description

4576 Belfort Place

Dallas, TX 75205

City State ZIP Code

Dallas

County

What is the property? Check all that apply.

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Lot 41, Block 107 of Highland Park West, 8th Inst., an addition to the City of Dallas, Dallas County, Texas

Source of Value: **DCAD 2023 certified value**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$1,143,030.00

Current value of the portion you own?

\$1,143,030.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee Simple

☒ **Check if this is community property** (see instructions)

If you own or have more than one, list here:

Debtor Martin, Terrence Peter; Martin, Jinja Delight

Case number (if known) _____

1.2 **Vacation Club**

Street address, if available, or other description

Various Hard Rock Hotel & Resort Locations

City _____ State _____ ZIP Code _____

County _____

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☒ Timeshare
☒ Other **Legendary Vacation Club Timeshare**

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$64,500.00

Current value of the portion you own?

\$64,500.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee Simple

☒ **Check if this is community property** (see instructions)

2. **Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here** _____ →

\$1,207,530.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. **Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- ☐ No
☒ Yes

3.1 Make: **Chevrolet**

Model: **Camaro**

Year: **2012**

Approximate mileage: **61713**

Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$15,618.00

Current value of the portion you own?

\$15,618.00

If you own or have more than one, describe here:

3.2 Make: **Ford**

Model: **Escape**

Year: **2016**

Approximate mileage: **74764**

Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$8,131.00

Current value of the portion you own?

\$8,131.00

Debtor **Martin, Terrence Peter; Martin, Jinja Delight**

Case number (if known) _____

3.3 Make: Honda Who has an interest in the property? Check one.

Model: Accord

Year: 2016

Approximate mileage: 74764

Other information:

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$15,729.00

Current value of the portion you own?

\$15,729.00

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

☒ No

☐ Yes

4.1 Make: _____

Model: _____

Year: _____

Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here



\$39,478.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. **Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

☒ Yes. Describe.

See Attached.

\$11,630.00

7. **Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☒ No

☐ Yes. Describe.

Debtor **Martin, Terrence Peter; Martin, Jinja Delight**

Case number (if known) _____

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☐ No

☒ Yes. Describe.

Antiques-@200.
100 comics-\$300.
Records-\$100.
CD's-\$50.
DVD's-\$600.
Tapes-\$50.

\$1,300.00

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☐ No

☒ Yes. Describe.

Camcorder-\$25.
Digital camera-\$100.
2 golf clubs-\$100.

\$225.00

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No

☐ Yes. Describe.

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe.

Clothing

\$600.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe.

2 wedding rings-\$8,000.
1 bracelet-\$2,000.
5 necklaces-\$3,000.
5 rings-\$3,000.
3 sets of earrings-\$2,000.
Costume jewelry-\$100.
Sunglasses-\$180.
5 watches-\$5,000.

\$23,280.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

☐ No

☒ Yes. Describe.

Debtors have 1 rescue dog as a family pet.

\$0.00

14. Any other personal and household items you did not already list, including any health aids you did not list

☒ No

☐ Yes. Give specific information.

Debtor Martin, Terrence Peter; Martin, Jinja Delight

Case number (if known) _____

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here



\$37,035.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☒ No

☐ Yes Cash:

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes

Institution name:

17.1. Checking account:	<u>Chase Bank -Account has been frozen by Eminent Funding, LLC (84.59)</u> <u>(account # ending in 6432)</u>	<u>(\$84.59)</u>
17.2. Checking account:	<u>Chase Bank-Account has been frozen by Eminent Funding, LLC-\$(30,050.63)</u> <u>(account # ending in 7486)</u>	<u>(\$30,050.63)</u>
17.3. Checking account:	<u>PNC Bank</u> <u>(ending in 1627)</u>	<u>\$0.00</u>
17.4. Checking account:	<u>Wells Fargo Bank</u> <u>(account # ending in 4656)</u>	<u>\$19.16</u>
17.5. Savings account:	<u>Chase Bank-Account has been frozen by Eminent Funding, LLC(-\$3,074.35)</u> <u>(account # ending in 1249)</u>	<u>(\$3,074.35)</u>
17.6. Other financial account:	<u>Chase Bank</u> <u>(ending in 1032)</u>	<u>\$0.00</u>
17.7. Other financial account:	<u>Chase</u> <u>(ending in 2238)</u>	<u>\$74.05</u>
17.8. Other financial account:	<u>Fidelity</u> <u>(ending in 76391)</u>	<u>\$1.51</u>

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No

☐ Yes Institution or issuer name:

_____	_____
_____	_____
_____	_____

Debtor Martin, Terrence Peter; Martin, Jinja Delight

Case number (if known) _____

19. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

☐ No

☒ Yes. Give specific
information about
them.....

Name of entity:

% of ownership:

Debtor Martin, Terrence Peter; Martin, Jinja Delight

Case number (if known) _____

100% interest in Dalfit Alpha, LLC, a Texas limited liability company created 5/13/2019 for the purpose of operating a franchised group fitness studio. Entity ceased operations in July, 2023. Assets: None - all equipment and inventory was seized and sold by the entity's andlord pre-petition. Bank account, with a overdrawn balance of -\$1,995.57, was closed in November, 2023 by JPMorgan Chase. Liabilities: Ascentium Capital (\$10,962.00), Eminent Funding (\$21,982.52), Gaedeke Holdings II, Ltd (\$407,992.00), ADP (\$1,992.67), American Express (\$15,592.26), BMI (\$783.65), Can Can Capital (\$26,707.92), Credence (\$280.02), JPMorgan Chase (\$1,995.57), Midwest Regional Bank (\$250,000.00), Vader Capital (\$4,440.21). Midwest Regional Bank holds a properly perfected UCC1 financing statement giving it a blanket lien on all assets of the entity. As the entity's debts greatly exceed the value of its assets the Debtors' ownership interest is believed to be of no value to their bankruptcy estate.	<u>100.00%</u>	<u>\$0.00</u>
100% interest in Dalfit Beta LLC, a Texas limited liability company created 5/13/2019 for the purpose of operating a franchised group fitness studio. Entity ceased operations in May, 2023. Assets: None - all equipment and inventory was seized and sold by the entity's andlord pre-petition. Bank account, with an overdrawn balance of -\$1,001.33, was closed in November, 2023 by JPMorgan Chase. Liabilities: Ascentium Capital (\$10,962.00), BAHA Investment, LLC (\$1,012,022.13), Eminent Funding (\$21,982.52), ADP (\$1,992.67), BMI (\$783.65), Greg & Tina Said (\$100,000.00), Intuit Financing (\$5,918.73), The Hartford (\$22.85). As the entity's debts greatly exceed the value of its assets the Debtors' ownership interest is believed to be of no value to their bankruptcy estate.	<u>100.00%</u>	<u>\$0.00</u>
100% interest in Dalfit Gamma LLC, a Texas limited liability company created 5/13/2019. The entity was created to be a management company for the Dalfit Alpha and Dalfit Beta entities. The entity never conducted business of any kind, has no tangible or intangible assets, and the Debtors' ownership interest is therefore believed to be of no value to their bankruptcy estate.	<u>100.00%</u>	<u>\$0.00</u>
100% interest in Dalfit Holdings Corporation, a Texas corporation created 3/19/2019 for the purpose of acting as a management company for the Dalfit Alfa, LLC and Dalfit Beta, LLC. Assets: brokerage account with Fidelity-\$72.12 Debts: \$620.00 owed to Benetrends. As the entity's debts exceed its assets the Debtors' ownership interest is believed to be of no value to their bankruptcy estate.	<u>100.00%</u>	<u>\$0.00</u>
100% interest in JDM Holdings, LLC, a Texas limited liability company created 2/20/2019 for the purpose of doing consulting work. However, the entity never operated or generated revenue of any kind. Assets: None. Liabilities: Chase credit card with balance of \$1,884.06. As the entity's debts greatly exceed the value of its assets the Debtors' ownership interest is believed to be of no value to their bankruptcy estate.	<u>100.00%</u>	<u>\$0.00</u>
100% interest in SDTuscany, LLC, a Texas limited liability company created 5/14/2019 to hold real estate, specifically a condominium located at 4860 Rolando Court #19, San Diego, CA 92115. In 2020 the condominium was pledged as collateral for Dalfit Alpha, LLC's SBA loan with MidWest Regional Bank. In May, 2023 the condominium was sold with the cooperation of Midwest Regional Bank and the net sale proceeds of \$197,892.48 were applied to pay down Dalfit Alpha, LLC's SBA loan. The entity has no remaining tangible or intangible assets of any kind and the Debtors' ownership interest is therefore believed to be of no value to their bankruptcy estate.	<u>100.00%</u>	<u>\$0.00</u>

Debtor **Martin, Terrence Peter; Martin, Jinja Delight**

Case number (if known) _____

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☒ No

☐ Yes. Give specific information about them.....

Issuer name:

_____	_____
_____	_____
_____	_____

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ No

☒ Yes. List each account separately.

Type of account:

Institution name:

401(k) or similar plan:	<u>Wells Fargo 401k account</u>	<u>\$1,653.86</u>
IRA:	<u>Fidelity IRA Account</u>	<u>\$36,609.93</u>

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No

☐ Yes

Institution name or individual:

Electric:	_____	_____
Gas:	_____	_____
Heating oil:	_____	_____
Security deposit on rental unit:	_____	_____
Prepaid rent:	_____	_____
Telephone:	_____	_____
Water:	_____	_____
Rented furniture:	_____	_____
Other:	_____	_____

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes

Issuer name and description:

_____	_____
_____	_____
_____	_____

Debtor **Martin, Terrence Peter; Martin, Jinja Delight**

Case number (if known) _____

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

☐ No

☒ Yes. Give specific information about them. ...

Joint Debtor is a beneficiary under the Arthur James and Mary Cotten Testamentary Trust and receives royalties on a monthly basis. The Trust contains specific spendthrift provisions limiting the rights of its beneficiaries and creditors of those beneficiaries. The Debtor's beneficial interest is therefore believed to be of no value to the Debtors' bankruptcy estate.

\$0.00

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them. ...

--

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☐ No

☒ Yes. Give specific information about them. ...

Debtors own the rights to five Spenga fitness franchises (specifically rights to operate in Plano, TX, Addison, TX, University Park, TX, Murphy, TX, and Allen, TX). A fee of \$49,900.00 was paid to purchase the rights to each of the 5 locations. Debtors have tried to sell but have received no offers to date.

unknown

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

☐ No

☒ Yes. Give specific information about them, including whether you already filed the returns and the tax years.

2023 | Estimated 2023 tax refund

Federal:

\$500.00

State:

Local:

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

Debtor Martin, Terrence Peter; Martin, Jinja Delight

Case number (if known) _____

☒ No

☐ Yes. Give specific information.

Alimony: _____
Maintenance: _____
Support: _____
Divorce settlement: _____
Property settlement: _____

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information.

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ No

☒ Yes. Name the insurance company of each policy and list its value. ...

Company name:

Beneficiary:

Surrender or refund value:

Two term life insurance policies with State Farm (no cash/surrender values)

Terrance Martin and Jinja Martin

\$0.00

Whole life insurance policy with Farmers Insurance (current cash/surrender value of \$1,000.00)

Jinja Martin

\$1,000.00

Whole life insurance policy with Metlife (current cash/surrender value of \$2,901.40)

Terrance Martin

\$2,901.40

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No

☐ Yes. Give specific information.

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☒ No

☐ Yes. Describe each claim.

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

☒ No

☐ Yes. Describe each claim.

Debtor **Martin, Terrence Peter; Martin, Jinja Delight**

Case number (if known) _____

35. Any financial assets you did not already list

☒ No

☐ Yes. Give specific information.

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here



\$9,550.34

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

☒ No. Go to Part 6.

☐ Yes. Go to line 38.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

☒ No

☐ Yes. Describe.

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☒ No

☐ Yes. Describe.

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

☒ No

☐ Yes. Describe.

41. Inventory

☒ No

☐ Yes. Describe.

42. Interests in partnerships or joint ventures

☒ No

☐ Yes. Describe

Name of entity:

% of ownership:

Debtor **Martin, Terrence Peter; Martin, Jinja Delight**

Case number (if known) _____

43. Customer lists, mailing lists, or other compilations

- ☒ No
- ☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?
- ☐ No
- ☐ Yes. Describe.

44. Any business-related property you did not already list

- ☒ No
- ☐ Yes. Give specific information

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here



\$0.00

Part 6:

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
- ☐ Yes. Go to line 47.

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

- ☒ No
- ☐ Yes

48. Crops—either growing or harvested

- ☒ No
- ☐ Yes. Give specific information.

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

- ☒ No
- ☐ Yes

Debtor **Martin, Terrence Peter; Martin, Jinja Delight**

Case number (if known)

50. Farm and fishing supplies, chemicals, and feed

☒ No

☐ Yes

51. Any farm- and commercial fishing-related property you did not already list

☒ No

☐ Yes. Give specific information.

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here



\$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☒ No

☐ Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here



\$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2



\$1,207,530.00

56. Part 2: Total vehicles, line 5

\$39,478.00

57. Part 3: Total personal and household items, line 15

\$37,035.00

58. Part 4: Total financial assets, line 36

\$9,550.34

59. Part 5: Total business-related property, line 45

\$0.00

60. Part 6: Total farm- and fishing-related property, line 52

\$0.00

61. Part 7: Total other property not listed, line 54

+

\$0.00

62. Total personal property. Add lines 56 through 61.

\$86,063.34

Copy personal property total →

+

\$86,063.34

63. Total of all property on Schedule A/B. Add line 55 + line 62.

\$1,293,593.34

Debtor Martin, Terrence Peter; Martin, Jinja Delight

Case number (if known) _____

Continuation Page

6.	Household goods and furnishings	
	Bedroom #1- Bed-\$200. Bureau-\$200. Dresser-\$150. 2 nightstands-\$100. Chest-\$20. Desk-\$20.	<u>\$690.00</u>
	Bedroom #2- Bed-\$50. Bureau-\$10. Dresser-\$100. 2 nightstands-\$30. Bench-\$10. Chest-\$10. Lamp-\$35.	<u>\$245.00</u>
	Bedroom #3- Armoire	<u>\$75.00</u>
	Books-\$100. Paintings-\$400. Prints-\$400. Framed photos-\$100. Figurines-\$100. Statues-\$100. Knickknacks-\$300. Candle holders-\$30. Vases-\$100.	<u>\$1,630.00</u>
	Dining room- Table-\$250. Chairs-\$200. Server-\$200. China closet-\$1,000. China-\$200. Silver-\$1,000.	<u>\$2,850.00</u>
	Game room/family room- Table-\$10. Free weights-\$450. Treadmill-\$50. 2 drums-\$700.	<u>\$1,210.00</u>
	Garage/Attic- Hand tools-\$50. Yard tools-\$50. Power tools-\$125. Edger-\$5. Ladder-\$100. Luggage-\$100. Holiday decorations-\$25. Miscellaneous decorations-\$25. Patio furniture-\$400.	<u>\$880.00</u>

Debtor Martin, Terrence Peter; Martin, Jinja Delight

Case number (if known) _____

Continuation Page

Kitchen- Table-\$150. Chairs-\$75. Stove-\$100. Refrigerator-\$100. Freezer-\$100. Dishwasher-\$400. Small appliances-\$100. Flatware-\$10. Dishes-\$20. Pots & pans-\$150. Glasses-\$10.	<u>\$1,215.00</u>
Living room- Sofa-\$200. 3 chairs-\$300. Coffee table-\$300. 4 end tables-\$300. 2 lamps-\$50. Rug-\$100. Game table-\$100. Tea cart-\$100. Cabinet-\$50.	<u>\$1,500.00</u>
Miscellaneous items- Washer-\$50. Dryer-\$20. Linens-\$30. Dry goods-\$400. Window treatments-\$500. File cabinet-\$10. 2 bookcases-\$50. Sewing machine-\$50. Miscellaneous household goods in storage-\$25.	<u>\$1,335.00</u>

Fill in this information to identify your case:

Debtor 1	<u>Terrence</u>	<u>Peter</u>	<u>Martin</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Jinja</u>	<u>Delight</u>	<u>Martin</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Texas</u>		
Case number (if known)	<u></u>		

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: Homestead 4576 Belfort Place Dallas, TX 75205	<u>\$1,143,030.00</u>	<input checked="" type="checkbox"/> <u>\$1,013,576.26</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Const. art. 16 §§ 50, 51, Texas Prop. Code §§ 41.001-.002</u>
Line from Schedule A/B: <u>1.1</u>			
Brief description: 2012 Chevrolet Camaro	<u>\$15,618.00</u>	<input checked="" type="checkbox"/> <u>\$15,618.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(9)</u>
Line from Schedule A/B: <u>3.1</u>			

3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☐ No
- ☒ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☒ No
- ☐ Yes

Debtor 1 **Terrence** **Peter** **Martin**
 Debtor 2 **Jinja** **Delight** **Martin**
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: 2016 Honda Accord Line from Schedule A/B: <u>3.3</u>	\$15,729.00	<input checked="" type="checkbox"/> \$13,845.07 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(9)
Brief description: Living room- Sofa-\$200. 3 chairs-\$300. Coffee table-\$300. 4 end tables-\$300. 2 lamps-\$50. Rug-\$100. Game table-\$100. Tea cart-\$100. Cabinet-\$50. Line from Schedule A/B: <u>6</u>	\$1,500.00	<input checked="" type="checkbox"/> \$1,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: Dining room- Table-\$250. Chairs-\$200. Server-\$200. China closet-\$1,000. China-\$200. Silver-\$1,000. Line from Schedule A/B: <u>6</u>	\$2,850.00	<input checked="" type="checkbox"/> \$2,850.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: Kitchen- Table-\$150. Chairs-\$75. Stove-\$100. Refrigerator-\$100. Freezer-\$100. Dishwasher-\$400. Small appliances-\$100. Flatware-\$10. Dishes-\$20. Pots & pans-\$150. Glasses-\$10. Line from Schedule A/B: <u>6</u>	\$1,215.00	<input checked="" type="checkbox"/> \$1,215.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: Miscellaneous items- Washer-\$50. Dryer-\$20. Linens-\$30. Dry goods-\$400. Window treatments-\$500. File cabinet-\$10. 2 bookcases-\$50. Sewing machine-\$50. Miscellaneous household goods in storage-\$25. Line from Schedule A/B: <u>6</u>	\$1,335.00	<input checked="" type="checkbox"/> \$1,335.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description: Bedroom #1- Bed-\$200. Bureau-\$200. Dresser-\$150. 2 nightstands-\$100. Chest-\$20. Desk-\$20. Line from Schedule A/B: <u>6</u>	\$690.00	<input checked="" type="checkbox"/> \$690.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)

Debtor 1 **Terrence** **Peter** **Martin**
 Debtor 2 **Jinja** **Delight** **Martin**
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: Bedroom #2- Bed-\$50. Bureau-\$10. Dresser-\$100. 2 nightstands-\$30. Bench-\$10. Chest-\$10. Lamp-\$35.	\$245.00	<input checked="" type="checkbox"/> \$245.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Line from Schedule A/B: <u>6</u>			
Brief description: Bedroom #3- Armoire	\$75.00	<input checked="" type="checkbox"/> \$75.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Line from Schedule A/B: <u>6</u>			
Brief description: Game room/family room- Table-\$10. Free weights-\$450. Treadmill-\$50. 2 drums-\$700.	\$1,210.00	<input checked="" type="checkbox"/> \$1,210.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Line from Schedule A/B: <u>6</u>			
Brief description: Garage/Attic- Hand tools-\$50. Yard tools-\$50. Power tools-\$125. Edger-\$5. Ladder-\$100. Luggage-\$100. Holiday decorations-\$25. Miscellaneous decorations-\$25. Patio furniture-\$400.	\$880.00	<input checked="" type="checkbox"/> \$880.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Line from Schedule A/B: <u>6</u>			
Brief description: Books-\$100. Paintings-\$400. Prints-\$400. Framed photos-\$100. Figurines-\$100. Statues-\$100. Knickknacks-\$300. Candle holders-\$30. Vases-\$100.	\$1,630.00	<input checked="" type="checkbox"/> \$1,630.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Line from Schedule A/B: <u>6</u>			
Brief description: Antiques-@200. 100 comics-\$300. Records-\$100. CD's-\$50. DVD's-\$600. Tapes-\$50.	\$1,300.00	<input checked="" type="checkbox"/> \$1,300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Line from Schedule A/B: <u>8</u>			

Debtor 1 **Terrence** **Peter** **Martin**
 Debtor 2 **Jinja** **Delight** **Martin**
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: Camcorder-\$25. Digital camera-\$100. 2 golf clubs-\$100. Line from Schedule A/B: <u>9</u>	\$225.00	<input checked="" type="checkbox"/> \$225.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(8)
Brief description: Clothing Line from Schedule A/B: <u>11</u>	\$600.00	<input checked="" type="checkbox"/> \$600.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(5)
Brief description: 2 wedding rings-\$8,000. 1 bracelet-\$2,000. 5 necklaces-\$3,000. 5 rings-\$3,000. 3 sets of earrings-\$2,000. Costume jewelry-\$100. Sunglasses-\$180. 5 watches-\$5,000. Line from Schedule A/B: <u>12</u>	\$23,280.00	<input checked="" type="checkbox"/> \$23,280.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(6)
Brief description: Debtors have 1 rescue dog as a family pet. Line from Schedule A/B: <u>13</u>	\$0.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(11)
Brief description: Fidelity IRA Account Line from Schedule A/B: <u>21</u>	\$36,609.93	<input checked="" type="checkbox"/> \$36,609.93 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code § 42.0021
Brief description: Wells Fargo 401k account Line from Schedule A/B: <u>21</u>	\$1,653.86	<input checked="" type="checkbox"/> \$1,653.86 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code § 42.0021
Brief description: Joint Debtor is a beneficiary under the Arthur James and Mary Cotten Testamentary Trust and receives royalties on a monthly basis. The Trust contains specific spendthrift provisions limiting the rights of its beneficiaries and creditors of those beneficiaries. The Debtor's beneficial interest is therefore believed to be of no value to the Debtors' bankruptcy estate. Line from Schedule A/B: <u>25</u>	\$0.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 541(c)(2)

Debtor 1 **Terrence** **Peter** **Martin**
 Debtor 2 **Jinja** **Delight** **Martin**
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: Two term life insurance policies with State Farm (no cash/surrender values) Line from Schedule A/B: <u>31</u>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Ins. Code §§ 1108.001, 1108.051 _____ _____
Brief description: Whole life insurance policy with Metlife (current cash/surrender value of \$2,901.40) Line from Schedule A/B: <u>31</u>	<u>\$2,901.40</u>	<input checked="" type="checkbox"/> <u>\$2,901.40</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Ins. Code §§ 1108.001, 1108.051 _____ _____
Brief description: Whole life insurance policy with Farmers Insurance (current cash/surrender value of \$1,000.00) Line from Schedule A/B: <u>31</u>	<u>\$1,000.00</u>	<input checked="" type="checkbox"/> <u>\$1,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Ins. Code §§ 1108.001, 1108.051 _____ _____

Fill in this information to identify your case:

Debtor 1 Terrence Peter Martin
 First Name Middle Name Last Name

Debtor 2 Jinja Delight Martin
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Texas

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
2.1	Capital One Auto Creditor's Name PO Box 60511 Number Street City of Industry, CA 91716 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred <u>2/14/2022</u> Last 4 digits of account number <u>6 1 8 1</u> Remarks: 48 monthly payments left on auto note.	Describe the property that secures the claim: 2016 Ford Escape As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	\$15,933.34	\$8,131.00	\$7,802.34
Add the dollar value of your entries in Column A on this page. Write that number here:		\$15,933.34			

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

	Additional Page	Column A	Column B	Column C
Part 1:	After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Amount of claim <small>Do not deduct the value of collateral.</small>	Value of collateral that supports this claim	Unsecured portion <small>If any</small>
2.2	<p><u>Carmax</u> <small>Creditor's Name</small> <u>PO Box 6045</u> <small>Number Street</small> <u>Carol Stream, IL 60197</u> <small>City State ZIP Code</small></p> <p>Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred <u>1/24/2020</u> Last 4 digits of account number <u>3 4 3 1</u></p> <p>Remarks: 7 monthly payments left on note.</p>	<p>Describe the property that secures the claim: <u>\$1,883.93</u></p> <p><u>2016 Honda Accord</u></p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____</p>	<u>\$15,729.00</u>	<u>\$0.00</u>
2.3	<p><u>Chase Home Mortgage</u> <small>Creditor's Name</small> <u>700 Kansas Lane LA4-6633</u> <small>Number Street</small> <u>Monroe, LA 71203</u> <small>City State ZIP Code</small></p> <p>Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred <u>2/18/2003</u> Last 4 digits of account number <u>8 5 3 1</u></p>	<p>Describe the property that secures the claim: <u>\$129,453.74</u></p> <p><u>Homestead</u> <u>4576 Belfort Place Dallas, TX 75205</u></p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____</p>	<u>\$1,143,030.00</u>	<u>\$0.00</u>
<p>Add the dollar value of your entries in Column A on this page. Write that number here:</p>		<u>\$131,337.67</u>		
<p>If this is the last page of your form, add the dollar value totals from all pages. Write that number here:</p>				

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

	Additional Page	Column A	Column B	Column C	
Part 1:	Amount of claim <small>Do not deduct the value of collateral.</small>	Value of collateral that supports this claim	Unsecured portion <small>If any</small>		
2.4	<p>Legendary Vacation Club</p> <p>Creditor's Name <u>Blvd. Kulkalcan KM 14.5</u> Number Street <u>Hotel Zone</u> <u>Cancun, QR, 77500</u> City State ZIP Code</p> <p>Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred <u>5/20/2018</u> Last 4 digits of account number <u>1 9 1 7</u></p> <p>Remarks: last payment under 72-month contract due 11/16/2024</p>	<p>Describe the property that secures the claim:</p> <div style="border: 1px solid black; padding: 2px; margin: 5px 0;"> Vacation Club Various Hard Rock Hotel & Resort Locations </div> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____</p>	\$5,006.45	\$64,500.00	\$0.00
<p>Add the dollar value of your entries in Column A on this page. Write that number here:</p>		\$5,006.45			
<p>If this is the last page of your form, add the dollar value totals from all pages. Write that number here:</p>		\$152,277.46			

Debtor 1	Terrence	Peter	Martin
	First Name	Middle Name	Last Name
Debtor 2	Jinja	Delight	Martin
(Spouse, if filing)	First Name	Middle Name	Last Name

United States Bankruptcy Court for the: _____ Eastern _____ District of _____ Texas _____

Case number _____
(if known)

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page 1 of 22

Debtor 1 Terrence Peter Martin Case number (if known) _____

Debtor 2 Jinja Delight Martin

First Name Middle Name Last Name

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

				Total claim
4.1	ADP	Last 4 digits of account number	<u>4 2 9 1</u>	<u>\$1,992.67</u>
Nonpriority Creditor's Name		When was the debt incurred?		
<u>c/o Altus Receivable Management</u>		<u>4/2020</u>		
<u>2121 Airline Dr. Ste. 520</u>		As of the date you file, the claim is: Check all that apply.		
Number Street		<input type="checkbox"/> Contingent		
<u>Metairie, LA 70001</u>		<input type="checkbox"/> Unliquidated		
City State ZIP Code		<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input checked="" type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u>		
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
Remarks: file #04956161				
4.2	American Express	Last 4 digits of account number	<u>1 0 0 5</u>	<u>\$15,592.26</u>
Nonpriority Creditor's Name		When was the debt incurred?		
<u>Correspondence/Bankruptcy</u>		<u>10/29/2020</u>		
<u>PO Box 981535</u>		As of the date you file, the claim is: Check all that apply.		
Number Street		<input checked="" type="checkbox"/> Contingent		
<u>El Paso, TX 79998-1535</u>		<input type="checkbox"/> Unliquidated		
City State ZIP Code		<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input checked="" type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <u>Business Debt - credit card</u>		
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.				Total claim
4.3	American Express Nonpriority Creditor's Name Correspondence/Bankruptcy PO Box 981535 Number Street El Paso, TX 79998-1535 City State ZIP Code	Last 4 digits of account number <u>7 1 0 0</u> When was the debt incurred? <u>9/17/2006</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt - Credit Card</u>		<u>\$17,948.35</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.4	Arvest Nonpriority Creditor's Name PO Box 298 Number Street Lowell, AR 72745 City State ZIP Code	Last 4 digits of account number <u>9 2 7 6</u> When was the debt incurred? <u>3/1995</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Personal Loan</u>		<u>\$557.32</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.5	Ascentium Capital Nonpriority Creditor's Name <u>Depat. 3059</u> <u>PO Box 11407</u> Number Street <u>Birmingham, AL 35246</u> City State ZIP Code	Last 4 digits of account number <u>5</u> <u>9</u> <u>4</u> <u>7</u> When was the debt incurred? <u>1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u>	<u>\$4,382.25</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Remarks: aroma therapy system for Dalfit entity			

4.6	Ascentium Capital Nonpriority Creditor's Name <u>Depat. 3059</u> <u>PO Box 11407</u> Number Street <u>Birmingham, AL 35246</u> City State ZIP Code	Last 4 digits of account number <u>9</u> <u>4</u> <u>4</u> <u>7</u> When was the debt incurred? <u>12/2/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u>	<u>\$5,846.40</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Remarks: aroma therapy system for Dalfit entity			

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.				Total claim
4.7	<u>BAHA Investment, LLC</u> Nonpriority Creditor's Name <u>c/o Strategic Asset Mgmt. Group, Inc</u> <u>10620 Treena St. STE. 230</u> Number Street <u>San Diego, CA 92131</u> City State ZIP Code	Last 4 digits of account number <u>a L L C</u> When was the debt incurred? <u>7/22/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Personal guarantee of commercial lease</u>	\$1,012,022.13	
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
Remarks: Personal guarantee of commercial lease, Dalfit Beta, LLC				
4.8	<u>Barclays</u> Nonpriority Creditor's Name <u>PO Box 8802</u> Number Street <u>Wilmington, DE 19899-8802</u> City State ZIP Code	Last 4 digits of account number <u>1 1 0 2</u> When was the debt incurred? <u>1/17/2009</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt - Credit Card</u>	\$20,147.34	
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.				Total claim
4.9	Benetrends, Inc Nonpriority Creditor's Name 1684 S. Broad St. Ste. 130 Number Street _____ Lansdale, PA 19446 City State ZIP Code	Last 4 digits of account number <u>6 8 5 4</u> When was the debt incurred? <u>7/2023</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$155.00
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u>				
4.10	BMI Nonpriority Creditor's Name 10 Music Square East Number Street _____ Nashville, TN 37203 City State ZIP Code	Last 4 digits of account number <u>4 4 7 2</u> When was the debt incurred? <u>1/1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$783.65
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt - music contract</u>				
Remarks: music contract for Dalfit entities				

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.11	Can Capital Asset Servicing, Inc Nonpriority Creditor's Name c/o Kathleen O'Connell 1850 Parkway Place SE Ste. 1150 Number Street Marietta, GA 30067 City State ZIP Code	Last 4 digits of account number <u>8 8 6 3</u> When was the debt incurred? <u>11/28/2022</u> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u>	<u>\$26,707.92</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Remarks: 23108627			
4.12	Chase Nonpriority Creditor's Name PO Box 15298 Number Street Wilmington, DE 19850-5298 City State ZIP Code	Last 4 digits of account number <u>1 9 5 6</u> When was the debt incurred? <u>11/2007</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt - Credit Card</u>	<u>\$23,295.97</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.13	<p>Chase</p> <p>Nonpriority Creditor's Name</p> <p>PO Box 15298</p> <p>Number Street</p> <p>Wilmington, DE 19850-5298</p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>3 5 6 1</u></p> <p>When was the debt incurred? <u>8/2019</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u></p>	<u>\$18,526.11</u>
4.14	<p>Chase</p> <p>Nonpriority Creditor's Name</p> <p>PO Box 15298</p> <p>Number Street</p> <p>Wilmington, DE 19850-5298</p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>3 5 6 0</u></p> <p>When was the debt incurred? <u>Various</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Business Debt - Credit Card</u></p>	<u>\$270.00</u>
4.15	<p>Chase</p> <p>Nonpriority Creditor's Name</p> <p>PO Box 15298</p> <p>Number Street</p> <p>Wilmington, DE 19850-5298</p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>1 9 5 0</u></p> <p>When was the debt incurred? <u>11/2007</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Business Debt - Credit Card</u></p>	<u>\$22,911.75</u>

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.			Total claim
4.16	Chase Nonpriority Creditor's Name <u>PO Box 15298</u> Number Street <u>Wilmington, DE 19850-5298</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>2 9 3 0</u> When was the debt incurred? <u>Various</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt - Credit Card</u>	<u>\$24,150.11</u>
4.17	Citibank Nonpriority Creditor's Name <u>Customer Service</u> <u>PO Box 6500</u> Number Street <u>Sioux Falls, SD 57117</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>1 8 5 7</u> When was the debt incurred? <u>2016</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt - Credit Card</u>	<u>\$37,600.24</u>
4.18	Citicards/Citibank Nonpriority Creditor's Name <u>PO Box 6004</u> Number Street <u>Sioux Falls, SD 57117</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>5 0 2 7</u> When was the debt incurred? <u>8/2023</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	<u>\$1,585.00</u>

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.19	Clinical Pathology Lab. Nonpriority Creditor's Name <u>Po Box 141669</u> Number Street <u>Austin, TX 78714-1669</u> City State ZIP Code	Last 4 digits of account number <u>0 1 7 8</u> When was the debt incurred? <u>7/2023</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>	\$65.42
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.20	Comptroller of Public Accounts Nonpriority Creditor's Name <u>PO Box 12548</u> Number Street <u>Austin, TX 78711-2548</u> City State ZIP Code	Last 4 digits of account number <u>0 7 1 4</u> When was the debt incurred? <u>2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u>	\$641.86
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.21	Credence Nonpriority Creditor's Name <u>1700 Dallas Pkwy. 204</u> Number Street <u>Dallas, TX 75248</u> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? <u>3/2019</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt - Services (Collecting for AT & T)</u>	\$280.02
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.				Total claim
4.22	Eminent Funding LLC Nonpriority Creditor's Name <u>369 Lexington Avenue</u> Number Street <u>New York, NY 10017</u> City State ZIP Code	Last 4 digits of account number <u>8 2 2 8</u> When was the debt incurred? <u>6/27/2023</u> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt - commercial loan guarantee</u>	Total claim <u>\$21,982.52</u>	
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Remarks: Commercial loan related to Dalfit entity				
4.23	Everest Business Funding Nonpriority Creditor's Name <u>102 W. 38th St., 6th FL</u> Number Street <u>New York, NY 10018</u> City State ZIP Code	Last 4 digits of account number <u>9 6 4 2</u> When was the debt incurred? <u>8/2023</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u>	Total claim <u>\$3,762.89</u>	
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.				Total claim
4.24	<u>Gaedeke Holdings, II, LTD</u> Nonpriority Creditor's Name <u>c/o McCathern Law</u> <u>3710 Rawlins Street Ste. 1100</u> Number Street <u>Dallas, TX 75219</u> City State ZIP Code	Last 4 digits of account number <u>a L L C</u> When was the debt incurred? <u>1/13/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$407,992.00
Remarks: Personal guarantee of commercial lease, Dalfit Alpha, LLC				
4.25	<u>Greg & Tina Sain</u> Nonpriority Creditor's Name <u>701 Kimbro</u> Number Street <u>Lantanna, TX 76226</u> City State ZIP Code	Last 4 digits of account number <u>h i s e</u> When was the debt incurred? <u>1/13/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100,000.00
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u>				

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.26	<u>Intuit Financing</u> Nonpriority Creditor's Name <u>c/o Weltman Weinberg & Reis Co., LPA</u> <u>5000 Bradenton Ave. Ste. 100</u> Number Street <u>Dublin, OH 43017</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>3</u> <u>5</u> <u>4</u> <u>6</u> When was the debt incurred? <u>3/2019</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u>	<u>\$5,918.73</u>
4.27	<u>JPMorgan Chase</u> Nonpriority Creditor's Name <u>Mail code OH1-1272</u> <u>PO Box 182223</u> Number Street <u>Columbus, OH 43218</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>4</u> <u>1</u> <u>8</u> <u>1</u> When was the debt incurred? <u>Various</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u>	<u>\$1,995.57</u>
4.28	<u>JPMorgan Chase</u> Nonpriority Creditor's Name <u>Mail code OH1-1272</u> <u>PO Box 182223</u> Number Street <u>Columbus, OH 43218</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>6</u> <u>4</u> <u>5</u> <u>0</u> When was the debt incurred? <u>Various</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u>	<u>\$1,001.33</u>

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

	After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.	Last 4 digits of account number	Total claim
4.29	<p><u>Linebarger, Goggan, Blair & Sampson, LLP</u> Nonpriority Creditor's Name <u>2777 N Stemmons Fwy Ste 1000</u> Number Street <u>Dallas, TX 75207-2328</u> City State ZIP Code</p> <p>Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>0 0 0 0</u></p> <p>When was the debt incurred? <u>2021, 2022</u></p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u></p>	<u>\$5,341.65</u>
4.30	<p><u>Macy's</u> Nonpriority Creditor's Name <u>PO Box 790003</u> Number Street <u>Saint Louis, MO 63179-0003</u> City State ZIP Code</p> <p>Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>3 5 5 0</u></p> <p>When was the debt incurred? <u>1/2023</u></p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<u>\$820.97</u>

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.31 MidWest Regional Bank Last 4 digits of account number 3 9 3 7 \$250,000.00

Nonpriority Creditor's Name

363 Festus Centre Drive, PO Box 1269

Number Street

Festus, MO 63028-7269

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Remarks: SBA loan, Dalfit Alpha, LLC

When was the debt incurred? 10/2020

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
 Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Business Debt - SBA Loan

4.32 Parkland Medical Center Last 4 digits of account number _____ \$2,562.09

Nonpriority Creditor's Name

Po Box 732325

Number Street

Dallas, TX 75373-2325

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred? 7/6/2023

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
 Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Medical Bill

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.33 PEAC formerly Marlin Last 4 digits of account number 3 4 2 9 \$4,048.39

Nonpriority Creditor's Name

PO Box 13604

Number Street

Philadelphia, PA 19101-3604

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Remarks: Equipment lease for Dalfit entity

When was the debt incurred? 11/10/2021

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
 Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Business Debt

4.34 Quest Diagnostics Last 4 digits of account number 4 5 6 6 \$9.18

Nonpriority Creditor's Name

PO Box 9000

Number Street

South Windsor, CT 06074-9000

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred? 7/2023

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
 Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Medical Bill

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.35	Ring Central Nonpriority Creditor's Name <u>14675 Dallas Parkway</u> Number Street <u>Dallas, TX 75254</u> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? <u>2/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u>	\$1,600.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.36	The Hartford Nonpriority Creditor's Name <u>Lockbox 0234</u> <u>PO Box 7247</u> Number Street <u>Philadelphia, PA 19170-0234</u> City State ZIP Code	Last 4 digits of account number <u>3 s v c</u> When was the debt incurred? <u>9/2023</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u>	\$22.85
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.37	T-Mobile Nonpriority Creditor's Name <u>PO Box 742596</u> Number Street <u>Cincinnati, OH 45274</u> City State ZIP Code	Last 4 digits of account number <u>8 6 2 9</u> When was the debt incurred? <u>8/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u>	unknown
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.38	Universal Accounting Services, LLC Nonpriority Creditor's Name <u>PO Box 1207</u> Number Street <u>Kansas City, MO 64152</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>0 A 0 1</u> When was the debt incurred? <u>12/2/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	<u>\$1,458.13</u>
4.39	Uptown Physicians Group Nonpriority Creditor's Name <u>2801 Lemmon Ave. Ste. 400</u> Number Street <u>Dallas, TX 75204-2356</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>1 0 8 9</u> When was the debt incurred? <u>7/2023</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>	<u>\$213.66</u>
4.40	Vader Capital Nonpriority Creditor's Name <u>PO Box 227970</u> Number Street <u>Miami, FL 33222</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>1 1 0 6</u> When was the debt incurred? <u>2/2023</u> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business debt - personal loan</u>	<u>\$4,440.21</u>

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.41	Wells Fargo Nonpriority Creditor's Name PO Box 65119 Number Street San Antonio, TX 78265 City State ZIP Code	Last 4 digits of account number <u>5 7 6 0</u> When was the debt incurred? <u>8/2023</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	\$1,465.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.42	White Road Capital, LLC Nonpriority Creditor's Name 27-01 Queens Plaza N. Number Street Long Island City, NY 11101 City State ZIP Code	Last 4 digits of account number <u>6 3 9 7</u> When was the debt incurred? <u>4/2023</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u>	\$5,800.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.43	Wick Phillips Nonpriority Creditor's Name 3131 McKinney Avenue Ste. 500 Number Street Dallas, TX 75204 City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? <u>2019</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Legal services</u>	\$4,108.50
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

1.	<u>Richard E. Clark</u> Name <u>2401 Fountain View Drive #306</u> Number Street <u>Houston, TX 77057</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.2</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number <u>1</u> <u>5</u> <u>3</u> <u>1</u>
2.	<u>Omega Optical</u> Name <u>13515 N. Stemmons Fwy.</u> Number Street <u>Dallas, TX 75234</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.5</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number <u>O</u> <u>A</u> <u>0</u> <u>1</u>
3.	<u>David Fogel, PC</u> Name <u>c/o David Fogel</u> <u>1225 Franklin Ave Ste. 201</u> Number Street <u>Garden City, NY 11530</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.22</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
4.	<u>Corporation Service Company</u> Name <u>Po Box 2576</u> Number Street <u>Springfield, IL 62708-2576</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.22</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number <u>9</u> <u>6</u> <u>4</u> <u>2</u>
5.	<u>Berkovich & Bouskila PLLC</u> Name <u>80 Broad Street Suite 3303</u> Number Street <u>New York, NY 10004</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.23</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
6.	<u>Kemp Smith LLP</u> Name <u>6001 W. Palmer Lane Ste. 370-134</u> Number Street <u>Austin, TX 78727</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.31</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed - Additional Page

7.	<u>U.S. Small Business Administration</u> Name <u>1545 Hawkins Blv. Ste. 202</u> Number Street <u>El Paso, TX 79925</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.31</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
8.	<u>Peac solutions</u> Name <u>300 Fellowship Road</u> Number Street <u>Mount Laurel, NJ 08054</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.33</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
9.	<u>Recovery Solutions Group, LLC</u> Name <u>1008 Mattlind Way</u> Number Street <u>Milford, DE 19963</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.40</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
10.	<u>Berkovich and Bouskila</u> Name <u>1545 Route 202</u> Number Street <u>Pomona, NY 10970</u> City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.40</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____

Debtor 1	<u>Terrence</u>	<u>Peter</u>	<u>Martin</u>	Case number (if known) _____
Debtor 2	<u>Jinja</u>	<u>Delight</u>	<u>Martin</u>	
	First Name	Middle Name	Last Name	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim	
Total claims from Part 1	6a. Domestic support obligations	6a.	<u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b.	<u>\$0.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c.	<u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. +	<u>\$0.00</u>
	6e. Total. Add lines 6a through 6d.	6e.	<u>\$0.00</u>
		Total claim	
Total claims from Part 2	6f. Student loans	6f.	<u>\$0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	<u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	<u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. +	<u>\$2,060,005.44</u>
	6j. Total. Add lines 6f through 6i.	6j.	<u>\$2,060,005.44</u>

Fill in this information to identify your case:

Debtor 1	<u>Terrence</u>	<u>Peter</u>	<u>Martin</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Jinja</u>	<u>Delight</u>	<u>Martin</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Texas</u>		
Case number (if known)	<u></u>		

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease	State what the contract or lease is for
<p>2.1</p> <p><u>Ascentium Capital</u></p> <p>Name</p> <p><u>Depart. 3059</u></p> <p><u>PO Box 11407</u></p> <p>Number Street</p> <p><u>Birmingham, AL 35246</u></p> <p>City State ZIP Code</p>	<p>Aroma therapy system</p> <p>Contract to be REJECTED</p>
<p>2.2</p> <p><u>Ascentium Capital</u></p> <p>Name</p> <p><u>Depart. 3059</u></p> <p><u>PO Box 11407</u></p> <p>Number Street</p> <p><u>Birmingham, AL 35246</u></p> <p>City State ZIP Code</p>	<p>Aroma Therapy System</p> <p>Contract to be REJECTED</p>
<p>2.3</p> <p><u>BAHA Investment, LLC</u></p> <p>Name</p> <p><u>c/o Strategic Asset Mgmt. Group, Inc</u></p> <p><u>10620 Treena St. STE. 230</u></p> <p>Number Street</p> <p><u>San Diego, CA 92131</u></p> <p>City State ZIP Code</p>	<p>Commercial Lease</p> <p>Contract to be REJECTED</p>
<p>2.4</p> <p><u>Eminent Funding LLC</u></p> <p>Name</p> <p><u>369 Lexington Avenue</u></p> <p>Number Street</p> <p><u>New York, NY 10017</u></p> <p>City State ZIP Code</p>	<p>Receivables contract</p> <p>Contract to be REJECTED</p>

Debtor 1 **Terrence** **Peter** **Martin**
 Debtor 2 **Jinja** **Delight** **Martin**
 First Name Middle Name Last Name

Case number (if known) _____

Additional Page if You Have More Contracts or Leases

Person or company with whom you have the contract or lease	State what the contract or lease is for
2.5 Extra Space Storage Name 4413 NE Loop 820 Number Street North Richland Hills, TX 76180 City State ZIP Code	Storage lease Contract to be: ASSUMED
2.6 Gaedeke Holdings, II, LTD Name 3710 Rawlins Street Ste. 1100 Number Street Dallas, TX 75219 City State ZIP Code	Commercial Lease Contract to be: REJECTED
2.7 PEAC formerly Marlin Name PO Box 13604 Number Street Philadelphia, PA 19101-3604 City State ZIP Code	equipment lease Contract to be: REJECTED
2.. Name Number Street City State ZIP Code	
2.. Name Number Street City State ZIP Code	
2.. Name Number Street City State ZIP Code	
2.. Name Number Street City State ZIP Code	
2.. Name Number Street City State ZIP Code	

Fill in this information to identify your case:

Debtor 1	Terrence	Peter	Martin
	First Name	Middle Name	Last Name
Debtor 2	Jinja	Delight	Martin
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>Eastern</u> District of <u>Texas</u>			
Case number _____ (if known)			

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

- ☐ No
☒ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☐ No. Go to line 3.
☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☐ No

☒ Yes. In which community state or territory did you live? Texas. Fill in the name and current address of that person.

Martin, Jinja Delight

Name of your spouse, former spouse, or legal equivalent

4576 Belfort Place

Number Street

Dallas, TX 75205

City State ZIP Code

☒ Yes. In which community state or territory did you live? Texas. Fill in the name and current address of that person.

Martin, Terrence Peter

Name of your spouse, former spouse, or legal equivalent

4576 Belfort Place

Number Street

Dallas, TX 75205

City State ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1 Dalfit Alpha, LLC

Name

4576 Belfort PI Ste. 150

Number Street

Dallas, TX 75205

City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line

4.1, 4.2, 4.6, 4.10, 4.11, 4.20, 4.21, 4.22, 4.23, 4.24, 4.27,
4.29, 4.31, 4.35, 4.40, 4.42

☒ Schedule G, line 2.1, 2.4, 2.6

Debtor 1 Terrence Peter Martin Case number (if known) _____
 Debtor 2 Jinja Delight Martin
 First Name Middle Name Last Name

Additional Page to List More Codebtors

Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
			Check all schedules that apply:
3.2	<u>Dalfit Alpha, LLC</u> Name <u>3232 Mckinney Ave. Ste. 150</u> Number Street <u>Dallas, TX 75204</u> City State ZIP Code	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.1, 4.2, 4.6, 4.10, 4.11, 4.20, 4.21, 4.22, 4.23, 4.24, 4.27, 4.29, 4.31, 4.35, 4.40, 4.42</u> <input type="checkbox"/> Schedule G, line _____	
3.3	<u>Dalfit Beta, LLC</u> Name <u>4576 Belfort Pl</u> Number Street <u>Dallas, TX 75205</u> City State ZIP Code	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.1, 4.5, 4.7, 4.10, 4.22, 4.25, 4.26, 4.28, 4.36</u> <input checked="" type="checkbox"/> Schedule G, line <u>2.2, 2.3, 2.4</u>	
3.4	<u>Dalfit Gamma, LLC</u> Name <u>4576 Belfort Pl</u> Number Street <u>Dallas, TX 75205</u> City State ZIP Code	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.22</u> <input checked="" type="checkbox"/> Schedule G, line <u>2.4</u>	
3.5	<u>Dalfit Holdings Corporation</u> Name <u>4576 Belfort Pl</u> Number Street <u>Dallas, TX 75205</u> City State ZIP Code	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.9, 4.22</u> <input checked="" type="checkbox"/> Schedule G, line <u>2.4</u>	
3.6	<u>JDM Holdings, LLC</u> Name <u>4576 Belfort Pl</u> Number Street <u>Dallas, TX 75205</u> City State ZIP Code	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.13, 4.22</u> <input type="checkbox"/> Schedule G, line _____	

Fill in this information to identify your case:

Debtor 1	<u>Terrence</u>	<u>Peter</u>	<u>Martin</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Jinja</u>	<u>Delight</u>	<u>Martin</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Texas</u>		
Case number (if known)	<u></u>		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

How long employed there?

Debtor 1

Debtor 2 or non-filing spouse

☐ Employed ☒ Not Employed

☒ Employed ☐ Not Employed

Senior Manager

Wells Fargo Bank, NA

Number Street

550 S. 4th St.
Number Street

City State Zip Code

Minneapolis, MN 55415
City State Zip Code

3 months

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.	2. <u>\$0.00</u>	<u>\$17,916.69</u>
3. Estimate and list monthly overtime pay.	3. + <u>\$0.00</u>	+ <u>\$0.00</u>
4. Calculate gross income. Add line 2 + line 3.	4. <u>\$0.00</u>	<u>\$17,916.69</u>

Debtor 1
Debtor 2Terrence
Jinja
First NamePeter
Delight
Middle NameMartin
Martin
Last Name

Case number (if known) _____

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here.....→	4. \$0.00	\$17,916.69
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$0.00	\$3,946.68
5b. Mandatory contributions for retirement plans	5b. \$0.00	\$0.00
5c. Voluntary contributions for retirement plans	5c. \$0.00	\$1,791.68
5d. Required repayments of retirement fund loans	5d. \$0.00	\$0.00
5e. Insurance	5e. \$0.00	\$1,523.86
5f. Domestic support obligations	5f. \$0.00	\$0.00
5g. Union dues	5g. \$0.00	\$0.00
5h. Other deductions. Specify: _____	5h. + \$0.00	+ \$0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$0.00	\$7,262.22
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$0.00	\$10,654.46
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$0.00	\$0.00
8b. Interest and dividends	8b. \$0.00	\$0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$0.00	\$0.00
8d. Unemployment compensation	8d. \$0.00	\$0.00
8e. Social Security	8e. \$0.00	\$0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$0.00	\$0.00
8g. Pension or retirement income	8g. \$0.00	\$0.00
8h. Other monthly income. Specify: <u>See additional page</u>	8h. + \$0.00	+ \$666.66
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$0.00	\$666.66
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10. \$0.00	\$11,321.12
11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: _____	11. +	\$0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies	12.	\$11,321.12
		Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain:		

Debtor 1	Terrence	Peter	Martin	Case number (if known) _____
Debtor 2	Jinja	Delight	Martin	
	First Name	Middle Name	Last Name	

		Amount
8h. Other monthly income For Debtor 2 or non-filing spouse		
Income From Arthur James and Mary Cotten Testamentary Trust		\$666.66
IRA from her Dad's estate		\$0.00

Fill in this information to identify your case:

Debtor 1	<u>Terrence</u>	<u>Peter</u>	<u>Martin</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Jinja</u>	<u>Delight</u>	<u>Martin</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Texas</u>		
Case number (if known)	_____		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☐ No. Go to line 2.
- ☒ Yes. Does Debtor 2 live in a separate household?
- ☒ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☐ No
- ☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

<u>Sibling</u>	<u>65 years</u> <u>(autistic)</u>	<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$3,502.23

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

4a. \$0.00

4b. \$0.00

4c. \$250.00

4d. \$0.00

Debtor 1 **Terrence** **Peter** **Martin**
 Debtor 2 **Jinja** **Delight** **Martin**

First Name Middle Name Last Name

Case number (if known) _____

		Your expenses
5. Additional mortgage payments for your residence , such as home equity loans	5.	\$0.00
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$835.00
6b. Water, sewer, garbage collection	6b.	\$155.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$322.29
6d. Other. Specify: _____	6d.	\$0.00
7. Food and housekeeping supplies	7.	\$1,200.00
8. Childcare and children's education costs	8.	\$0.00
9. Clothing, laundry, and dry cleaning	9.	\$200.00
10. Personal care products and services	10.	\$175.00
11. Medical and dental expenses	11.	\$183.33
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$725.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$100.00
14. Charitable contributions and religious donations	14.	\$0.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	\$500.00
15b. Health insurance	15b.	\$0.00
15c. Vehicle insurance	15c.	\$372.00
15d. Other insurance. Specify: _____	15d.	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	\$0.00
17. Installment or lease payments:		
17a. Car payments for Vehicle 1 <u>2016 Ford Escape</u>	17a.	\$330.00
17b. Car payments for Vehicle 2 <u>2016 Honda Accord</u>	17b.	\$265.08
17c. Other. Specify: <u>Storage rental</u>	17c.	\$77.00
17d. Other. Specify: <u>Vacation club</u>	17d.	\$417.18
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$0.00
19. Other payments you make to support others who do not live with you. Specify: _____	19.	\$0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a.	\$0.00
20b. Real estate taxes	20b.	\$0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

Debtor 1
Debtor 2

Terrence
Jinja

Peter
Delight

Martin
Martin

First Name

Middle Name

Last Name

Case number (if known) _____

21. Other. Specify: See Additional Page

21. + \$451.00

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$10,060.11

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$10,060.11

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from *Schedule I*.

23a. \$11,321.12

23b. Copy your monthly expenses from line 22c above.

23b. - \$10,060.11

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. \$1,261.01

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

None

Debtor 1
Debtor 2

Terrence
Jinja

Peter
Delight

Martin
Martin

First Name

Middle Name

Last Name

Case number (if known) _____

Amount

12. Transportation: gas, maintenance, bus or train fare

<u>Gasoline</u>	<u>\$350.00</u>
<u>Maintenance/repairs</u>	<u>\$300.00</u>
<u>Registration</u>	<u>\$25.00</u>
<u>Tolls</u>	<u>\$50.00</u>

21. Other

<u>Pet food/care</u>	<u>\$135.00</u>
<u>Bank fees</u>	<u>\$50.00</u>
<u>Work lunches</u>	<u>\$120.00</u>
<u>Annual fees for vacation club</u>	<u>\$146.00</u>

Fill in this information to identify your case:

Debtor 1	<u>Terrence</u>	<u>Peter</u>	<u>Martin</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Jinja</u>	<u>Delight</u>	<u>Martin</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Texas</u>		
Case number (if known)	<u></u>		

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)

1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	<u>\$1,207,530.00</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	<u>\$86,063.34</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	<u>\$1,293,593.34</u>

Part 2: Summarize Your Liabilities

Your liabilities Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i>	<u>\$152,277.46</u>
---	---------------------

3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	<u>\$0.00</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	<u>\$2,060,005.44</u>

Your total liabilities \$2,212,282.90

Part 3: Summarize Your Income and Expenses

4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of <i>Schedule I</i>	<u>\$11,321.12</u>
---	--------------------

5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of <i>Schedule J</i>	<u>\$10,060.11</u>
---	--------------------

Debtor 1	Terrence	Peter	Martin	
Debtor 2	Jinja	Delight	Martin	
	First Name	Middle Name	Last Name	Case number (if known) _____

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

7. What kind of debt do you have?

- ☐ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☒ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	_____
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	_____
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	_____
9d. Student loans. (Copy line 6f.)	_____
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	_____
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ _____
9g. Total. Add lines 9a through 9f.	<div style="border: 1px solid black; height: 30px; width: 100%;"></div>

Fill in this information to identify your case:

Debtor 1 Terrence Peter Martin
First Name Middle Name Last Name

Debtor 2 Jinja Delight Martin
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Texas

Case number _____
(if known)

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?



No

☐ Yes. Name of person _____ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)*.

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X

/s/ Terrence Peter Martin

Terrence Peter Martin, Debtor 1

X

/s/ Jinja Delight Martin

Jinja Delight Martin, Debtor 2

Date 12/21/2023
MM/ DD/ YYYY

Date 12/21/2023
MM/ DD/ YYYY

Fill in this information to identify your case:

Debtor 1	<u>Terrence</u>	<u>Peter</u>	<u>Martin</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Jinja</u>	<u>Delight</u>	<u>Martin</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Texas</u>		
Case number (if known)	<u></u>		

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☒ Married
- ☐ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
- ☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
<input type="checkbox"/> Same as Debtor 1 _____ Number Street _____ City State ZIP Code	<input type="checkbox"/> Same as Debtor 1 From _____ To _____ _____ City State ZIP Code	<input type="checkbox"/> Same as Debtor 1 _____ Number Street _____ City State ZIP Code	<input type="checkbox"/> Same as Debtor 1 From _____ To _____ _____ City State ZIP Code
<input type="checkbox"/> Same as Debtor 1 _____ Number Street _____ City State ZIP Code	<input type="checkbox"/> Same as Debtor 1 From _____ To _____ _____ City State ZIP Code	<input type="checkbox"/> Same as Debtor 1 _____ Number Street _____ City State ZIP Code	<input type="checkbox"/> Same as Debtor 1 From _____ To _____ _____ City State ZIP Code

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☐ No
- ☒ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Debtor 1 **Terrence** **Peter** **Martin**
 Debtor 2 **Jinja** **Delight** **Martin**
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

☐ No

☒ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$83,200.00	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$41,346.20
For last calendar year: (January 1 to December 31, <u>2022</u>) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$103,600.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
For the calendar year before that: (January 1 to December 31, <u>2021</u>) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$74,603.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

☐ No

☒ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross Income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:			Trust Income	\$2,303.82
			IRA from Dad's Estate	\$15,000.00
For last calendar year: (January 1 to December 31, <u>2022</u>) YYYY	Interest Income	\$19.00	Rental Income	\$9,706.00
	Dividend Income	\$2,496.00	IRA	\$550,583.00
	Capital Gain	\$18,401.00	Pension/Annuity	\$11,247.00
For the calendar year before that: (January 1 to December 31, <u>2021</u>) YYYY	Interest Income	\$494.00	Pension/Annuity	\$100,797.00
	Dividends	\$2,822.00	IRA	\$100,030.00
	Capital Gain	\$2,071.00		

Debtor 1	Terrence	Peter	Martin	
Debtor 2	Jinja	Delight	Martin	
	First Name	Middle Name	Last Name	Case number (if known) _____

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

☒ **No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more?

☒ **No.** Go to line 7.

☐ **Yes.** List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.

☐ **Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ **No.** Go to line 7.

☐ **Yes.** List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name				<input type="checkbox"/> Mortgage
Number Street				<input type="checkbox"/> Car
				<input type="checkbox"/> Credit card
				<input type="checkbox"/> Loan repayment
				<input type="checkbox"/> Suppliers or vendors
City State ZIP Code				<input type="checkbox"/> Other _____

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☒ **No**

☐ **Yes.** List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name				
Number Street				
City State ZIP Code				

Debtor 1	Terrence	Peter	Martin	
Debtor 2	Jinja	Delight	Martin	
	First Name	Middle Name	Last Name	Case number (if known)

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?
 Include payments on debts guaranteed or cosigned by an insider.

- ☒ No
- ☐ Yes. List all payments that benefited an insider.

		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name					
Number	Street				
City	State	ZIP Code			

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?
 List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☐ No
- ☒ Yes. Fill in the details.

		Nature of the case	Court or agency	Status of the case
Case title	Gaedeke Holdings, II, LTD vs. Dalfit Alpha, LLC d/b/a "Spenga" and Jinja Martin	Civil action regarding unpaid debt	193rd District Court, Dallas County, Texas	<input checked="" type="checkbox"/> Pending
Case number	DC-23-09626		George L. Allen, Sr. Courts Building 600 Commerce Street 8th Floor, New Tower Number Street Dallas, TX 75202 City State ZIP Code	<input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case title	Eminent Funding LLC vs Dalfit Alpha LLC, Dalfit Beta LLC, JDM Holdings, LLC, Dalfit Gamma, LLC, Dalfit Holdings Corporation, and Jinja Delight Martin	Civil action regarding unpaid debt	Supreme Court of the State of New York County of Kings Court Name 360 Adams Street #4 Number Street Brooklyn, NY 11201 City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case number	525054/2023			

Debtor 1 **Terrence** **Peter** **Martin**
 Debtor 2 **Jinja** **Delight** **Martin**
 First Name Middle Name Last Name Case number (if known)

Nature of the case	Court or agency	Status of the case
Case title Can Capital Asset Servicing, Inc., as assignee of WebBank v. Dalfit Alpha LLC, a Texas limited liability company and Jinja D Martin, Individually Case number 2023-0152479-CV	Civil action regarding unpaid debt In the Superior Court of Cobb County State of Georgia Court Name 70 Haynes Street Number Street Marietta, GA 30090 City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case title American Express National Bank v Jinja Martin, aka Jinja D Martin, Dalfit Alpha LLC Case number JPC-23-06915-31	Civil action regarding unpaid debt Justice Court Precinct 3, Place 1, Dallas County, TX Court Name 6820 LBJ Freeway Suite 3100 Number Street Dallas, TX 75230 City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?
 Check all that apply and fill in the details below.

- ☐ No. Go to line 11.
☒ Yes. Fill in the information below.

Describe the property	Date	Value of the property
Eminent Funding LLC Creditor's Name 369 Lexington Avenue Number Street New York, NY 10017 City State ZIP Code	Funds on deposit in three separate accounts held at Chase Bank 11/21/2023	(\$33,210.00)

Explain what happened

☐ Property was repossessed.
☐ Property was foreclosed.
☐ Property was garnished.
☒ Property was attached, seized, or levied.

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No
☐ Yes. Fill in the details.

Describe the action the creditor took	Date action was taken	Amount
Creditor's Name Number Street City State ZIP Code		

Last 4 digits of account number: XXXX- _ _ _ _

Debtor 1	Terrence	Peter	Martin	
Debtor 2	Jinja	Delight	Martin	
	First Name	Middle Name	Last Name	Case number (if known) _____

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

☒ No
☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

☒ No
☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
<div>Person to Whom You Gave the Gift</div> <div></div> <div></div> <div>Number Street</div> <div></div> <div>City State ZIP Code</div> <div>Person's relationship to you _____</div>			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

☒ No
☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
<div>Charity's Name</div> <div></div> <div></div> <div>Number Street</div> <div></div> <div>City State ZIP Code</div>			

Debtor 1	Terrence	Peter	Martin	
Debtor 2	Jinja	Delight	Martin	
	First Name	Middle Name	Last Name	Case number (if known)

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No
- ☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	Date of your loss	Value of property lost

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- ☐ No
- ☒ Yes. Fill in the details.

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
<u>DeMarco Mitchell, PLLC</u> Person Who Was Paid <u>500 N. Central Expressway Suite 500</u> Number Street <u>Plano, TX 75074</u> City State ZIP Code <u>www.demarc Mitchell.com</u> Email or website address Person Who Made the Payment, if Not You	Attorney's Fee 12/15/2023	\$3,000.00
Description and value of any property transferred	Date payment or transfer was made	Amount of payment
<u>Allen Credit and Debt Counseling</u> Agency Person Who Was Paid <u>800 Dakota Avenue N.</u> Number Street <u>Huron, SD 57350</u> City State ZIP Code <u>https://www.acdcas.com</u> Email or website address Person Who Made the Payment, if Not You	Credit counseling service fee 12/01/2023	\$25.00

Debtor 1	Terrence	Peter	Martin	
Debtor 2	Jinja	Delight	Martin	
	First Name	Middle Name	Last Name	Case number (if known) _____

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No
- ☐ Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid			
Number Street			
City State ZIP Code			

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).

Do not include gifts and transfers that you have already listed on this statement.

- ☐ No
- ☒ Yes. Fill in the details.

	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
<u>Hasan Randhawa and Aisha Admani</u> Person Who Received Transfer <u>4860 Rolando Ct. #19</u> Number Street <u>San Diego, CA 92115</u> City State ZIP Code Person's relationship to you <u>none</u>	The Condo in Debtor's business SDTuscany, LLC was located @ 4860 Rolando Court, San Diego, CA. and received \$330,000.00 for the sale of the Condo.	The Condo in Debtor's business SDTuscany, LLC @ 4860 Rolando Court, San Diego, CA. SDTuscany, LLC received \$330,000.00 for the sale of the Condo. The proceeds of \$197,892.48 were given to Midwest Regional Bank towards an SBA loan debt.	<u>5/2023</u>

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?
 (These are often called *asset-protection devices*.)

- ☒ No
- ☐ Yes. Fill in the details.

	Description and value of the property transferred	Date transfer was made
Name of trust _____		

Debtor 1	Terrence	Peter	Martin	
Debtor 2	Jinja	Delight	Martin	Case number (if known) _____
	First Name	Middle Name	Last Name	

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

☐ No

☒ Yes. Fill in the details.

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
XXXX- i _ n _ o _ r _	<input checked="" type="checkbox"/> Checking	12/2023	\$0.00
	<input type="checkbox"/> Savings		
	<input type="checkbox"/> Money market		
	<input type="checkbox"/> Brokerage		
	<input type="checkbox"/> Other _____		

JPMorgan Chase, N.A.

Name of Financial Institution

PO Box 78058

Number Street

Phoenix, AZ 85062-8058

City State ZIP Code

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

☒ No

☐ Yes. Fill in the details.

Who else had access to it?	Describe the contents	Do you still have it?
<p>Name of Financial Institution</p> <p>Number Street</p> <p>City State ZIP Code</p>		<p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

☐ No

☒ Yes. Fill in the details.

Who else has or had access to it?	Describe the contents	Do you still have it?
<p>Extra Space Storage</p> <p>Name of Storage Facility</p> <p>4413 NE Loop 820</p> <p>Number Street</p> <p>North Richland Hills, TX 76180</p> <p>City State ZIP Code</p>	<p>Paperwork, Sewing machine-\$50.,</p> <p>Miscellaneous household goods -\$25.</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes</p>

Debtor 1	Terrence	Peter	Martin	
Debtor 2	Jinja	Delight	Martin	
	First Name	Middle Name	Last Name	Case number (if known) _____

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No
- ☐ Yes. Fill in the details.

Where is the property?	Describe the property	Value
<p>Owner's Name _____</p> <p>Number _____ Street _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p>City _____ State _____ ZIP Code _____</p>		

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
- ☐ Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
<p>Name of site _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p>		

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No
- ☐ Yes. Fill in the details.

Debtor 1 **Terrence** **Peter** **Martin**
 Debtor 2 **Jinja** **Delight** **Martin**
 First Name Middle Name Last Name Case number (if known)

Governmental unit		Environmental law, if you know it	Date of notice
Name of site			
Governmental unit			
Number	Street		
City		State	ZIP Code

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
☐ Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case	
Case title		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded	
Court Name			
Number			Street
City			State

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
☒ A member of a limited liability company (LLC) or limited liability partnership (LLP)
☐ A partner in a partnership
☒ An officer, director, or managing executive of a corporation
☒ An owner of at least 5% of the voting or equity securities of a corporation
☐ No. None of the above applies. Go to Part 12.
☒ Yes. Check all that apply above and fill in the details below for each business.

Dalfit Alpha, LLC Name 4576 Belfort Pl Number Street Dallas, TX 75205 City State ZIP Code	Describe the nature of the business Franchised Group Fitness Studio	Employer Identification number Do not include Social Security number or ITIN. EIN: <u>8 4 - 1 8 3 6 7 3 8</u>
	Name of accountant or bookkeeper Saville Dodgen & Company, PLLC	Dates business existed From <u>3/2019</u> To <u>7/2023</u>

Debtor 1 **Terrence** **Peter** **Martin**
 Debtor 2 **Jinja** **Delight** **Martin**
 First Name Middle Name Last Name Case number (if known)

Dalfit Beta, LLC
 Name

4576 Belfort Pl
 Number Street

Dallas, TX 75205
 City State ZIP Code

Describe the nature of the business

Franchised Group Fitness Studio

Employer Identification number
 Do not include Social Security number or ITIN.

EIN: 8 4 - 1 9 0 2 2 2 6

Name of accountant or bookkeeper

Saville Dodgen and Company PLLC

Dates business existed

From 5/13/2019 To 5/2023

Dalfit Holdings Corporation
 Name

4576 Belfort Pl
 Number Street

Dallas, TX 75205
 City State ZIP Code

Describe the nature of the business

Management company for the Dalfit Alpha, LLC, and Dalfit Beta, LLC

Employer Identification number
 Do not include Social Security number or ITIN.

EIN: 8 3 - 4 0 5 9 3 5 0

Name of accountant or bookkeeper

Saville Dodgen and Company PLLC

Dates business existed

From 3/19/2019 To _____

Dalfit Gamma, LLC
 Name

4576 Belfort Pl
 Number Street

Dallas, TX 75205
 City State ZIP Code

Describe the nature of the business

Management Company for LLC's (never operated)

Employer Identification number
 Do not include Social Security number or ITIN.

EIN: 8 4 - 1 9 2 3 5 4 9

Name of accountant or bookkeeper

Saville Dodgen and Company PLLC

Dates business existed

From 3/2019 To _____

JDM Holdings, LLC
 Name

4576 Belfort Pl
 Number Street

Dallas, TX 75205
 City State ZIP Code

Describe the nature of the business

Consulting Work

Employer Identification number
 Do not include Social Security number or ITIN.

EIN: 8 4 - 1 9 2 3 5 4 9

Name of accountant or bookkeeper

Saville Dodgen and Company PLLC

Dates business existed

From 3/2019 To 12/2022

SDTuscany, LLC
 Name

4576 Belfort Pl
 Number Street

Dallas, TX 75205
 City State ZIP Code

Describe the nature of the business

Holding Company for condominium in San Diego, CA

Employer Identification number
 Do not include Social Security number or ITIN.

EIN: 8 4 - 2 1 2 5 2 9 4

Name of accountant or bookkeeper

Saville Dodgen and Company, PLLC

Dates business existed

From 5/14/2019 To 3/2023

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

☒ No

☐ Yes. Fill in the details below.

Debtor 1	Terrence	Peter	Martin	
Debtor 2	Jinja	Delight	Martin	Case number (if known) _____
	First Name	Middle Name	Last Name	

_____		_____
Name		MM / DD / YYYY

Number	Street

City	State	ZIP Code

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Terrence Peter Martin
Signature of Terrence Peter Martin, Debtor 1

X /s/ Jinja Delight Martin
Signature of Jinja Delight Martin, Debtor 2

Date 12/21/2023

Date 12/21/2023

Did you attach additional pages to your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☒ No
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No
☐ Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	<u>Terrence</u>	<u>Peter</u>	<u>Martin</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Jinja</u>	<u>Delight</u>	<u>Martin</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Texas</u>		
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: <u>Chase Home Mortgage</u>	<input type="checkbox"/> Surrender the property.	<input type="checkbox"/> No
Description of property securing debt: <u>Homestead</u> <u>4576 Belfort Place Dallas, TX 75205</u>	<input type="checkbox"/> Retain the property and redeem it.	<input checked="" type="checkbox"/> Yes
	<input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
	<input type="checkbox"/> Retain the property and [explain]:	
Creditor's name: <u>Capital One Auto</u>	<input type="checkbox"/> Surrender the property.	<input checked="" type="checkbox"/> No
Description of property securing debt: <u>2016 Ford Escape</u>	<input type="checkbox"/> Retain the property and redeem it.	<input type="checkbox"/> Yes
	<input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
	<input type="checkbox"/> Retain the property and [explain]:	

Debtor 1	Terrence	Peter	Martin	Case number (if known) _____
Debtor 2	Jinja	Delight	Martin	
	First Name	Middle Name	Last Name	

Additional Page for Part 1

Creditor's name:	Carmax	<input type="checkbox"/> Surrender the property.	<input type="checkbox"/> No
Description of property securing debt:	2016 Honda Accord	<input type="checkbox"/> Retain the property and redeem it.	<input checked="" type="checkbox"/> Yes
		<input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
		<input type="checkbox"/> Retain the property and [explain]:	

Debtor 1 **Terrence** **Peter** **Martin**
 Debtor 2 **Jinja** **Delight** **Martin**
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name:	BAHA Investment, LLC	<input checked="" type="checkbox"/> No
Description of leased property:	Commercial Lease	<input type="checkbox"/> Yes
Lessor's name:	Gaedeke Holdings, II, LTD	<input checked="" type="checkbox"/> No
Description of leased property:	Commercial Lease	<input type="checkbox"/> Yes
Lessor's name:	Eminent Funding LLC	<input checked="" type="checkbox"/> No
Description of leased property:	Receivables contract	<input type="checkbox"/> Yes
Lessor's name:	Ascentium Capital	<input checked="" type="checkbox"/> No
Description of leased property:	Aroma therapy system	<input type="checkbox"/> Yes
Lessor's name:	Ascentium Capital	<input checked="" type="checkbox"/> No
Description of leased property:	Aroma Therapy System	<input type="checkbox"/> Yes
Lessor's name:	PEAC formerly Marlin	<input checked="" type="checkbox"/> No
Description of leased property:	equipment lease	<input type="checkbox"/> Yes
Lessor's name:	Extra Space Storage	<input type="checkbox"/> No
Description of leased property:	Storage lease	<input checked="" type="checkbox"/> Yes

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ Terrence Peter Martin **X** /s/ Jinja Delight Martin
 Signature of Debtor 1 Signature of Debtor 2

Date 12/21/2023 Date 12/21/2023
 MM/ DD/ YYYY MM/ DD/ YYYY

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
Eastern District of Texas

In re Martin, Terrence Peter

Martin, Jinja Delight

Case No. _____

Debtor

Chapter 7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$3,000.00

Prior to the filing of this statement I have received \$3,000.00

Balance Due \$0.00

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

B2030 (Form 2030) (12/15)

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

12/21/2023
Date

/s/ Michael S. Mitchell
Michael S. Mitchell
Signature of Attorney

Bar Number: 00788065
DeMarco Mitchell, PLLC
500 N. Central Expressway Suite 500
Plano, TX 75074
Phone: (972) 578-1400

DeMarco Mitchell, PLLC
Name of law firm

Date: 12/21/2023

/s/ Terrence Peter Martin
Terrence Peter Martin

/s/ Jinja Delight Martin
Jinja Delight Martin

Fill in this information to identify your case:

Debtor 1	Terrence	Peter	Martin
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Jinja	Delight	Martin
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Eastern District of Texas		
Case number (if known)			

☐ Check if this is an amended filing

Official Form 122A-1Supp

Statement of Exemption from Presumption of Abuse Under § 707(b)(2) 12/15

File this supplement together with **Chapter 7 Statement of Your Current Monthly Income** (Official Form 122A-1), if you believe that you are exempted from a presumption of abuse. Be as complete and accurate as possible. If two married people are filing together, and any of the exclusions in this statement applies to only one of you, the other person should complete a separate Form 122A-1 if you believe that this is required by 11 U.S.C. § 707(b)(2)(C).

Part 1: Identify the Kind of Debts You Have

1. **Are your debts primarily consumer debts?** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." Make sure that your answer is consistent with the answer you gave at line 16 of the *Voluntary Petition* (Official Form 101).
- ☒ No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.
- ☐ Yes. Go to Part 2.

Part 2: Determine Whether Military Service Provisions Apply to You

2. **Are you a disabled veteran** (as defined in 38 U.S.C. § 3741(1))?
- ☐ No. Go to line 3.
- ☐ Yes. Did you incur debts mostly while you were on active duty or while you were performing a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
- ☐ No. Go to line 3.
- ☐ Yes. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.
3. **Are you or have you been a Reservist or member of the National Guard?**
- ☐ No. Complete Form 122A-1. Do not submit this supplement.
- ☐ Yes. Were you called to active duty or did you perform a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1)
- ☐ No. Complete Form 122A-1. Do not submit this supplement.
- ☐ Yes. Check any one of the following categories that applies:
- ☐ I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.
- ☐ I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on _____, which is fewer than 540 days before I file this bankruptcy case.
- ☐ I am performing a homeland defense activity for at least 90 days.
- ☐ I performed a homeland defense activity for at least 90 days, ending on _____, which is fewer than 540 days before I file this bankruptcy case.

If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, *The Means Test does not apply now*, and sign Part 3. Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The *exclusion period* means the time you are on active duty or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).

If your exclusion period ends before your case is closed, you may have to file an amended form later

Fill in this information to identify your case:

Debtor 1	Terrence	Peter	Martin
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Jinja	Delight	Martin
	First Name	Middle Name	Last Name

United States Bankruptcy Court for the: **Eastern District of Texas**

Case number
(if known) _____

Check one box only as directed in this form and in Form 122A-1Supp:

- ☒ 1. There is no presumption of abuse.
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.
- ☐ Check if this is an amended filing

Official Form 122A-1**Chapter 7 Statement of Your Current Monthly Income**

12/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income**1. What is your marital and filing status? Check one only.**

- ☐ **Not married.** Fill out Column A, lines 2-11.
- ☐ **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.
- ☐ **Married and your spouse is NOT filing with you. You and your spouse are:**
- ☐ **Living in the same household and are not legally separated.** Fill out both Column A and B, lines 2-11.
- ☐ **Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	_____	_____
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	_____	_____
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	_____	_____
5. Net income from operating a business, profession, or farm	Debtor 1	Debtor 2
Gross receipts (before all deductions)	_____	_____
Ordinary and necessary operating expenses	- _____	- _____
Net monthly income from a business, profession, or farm	_____	_____
		Copy here →
6. Net income from rental and other real property	Debtor 1	Debtor 2
Gross receipts (before all deductions)	_____	_____
Ordinary and necessary operating expenses	- _____	- _____
Net monthly income from rental or other real property	_____	_____
		Copy here →
7. Interest, dividends, and royalties	_____	_____

Column A Debtor 1	Column B Debtor 2 or non-filing spouse
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8. Unemployment compensation

Do not enter the amount if you contend that the amount received was a benefit under

the Social Security Act. Instead, list it here: ↓

For you.....

For your spouse.....

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

Total amounts from separate pages, if any.

11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

+		+		=	

Total current monthly income

Part 2: Determine Whether the Means Test Applies to You

12. Calculate your current monthly income for the year. Follow these steps:

12a. Copy your total current monthly income from line 11.....

Copy line 11 here →

Multiply by 12 (the number of months in a year).

x 12

12b. The result is your annual income for this part of the form.

12b.

13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live.

Fill in the number of people in your household.

Fill in the median family income for your state and size of household..... 13.

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?

14a. ☐ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.* Go to Part 3.

14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.* Go to Part 3 and fill out Form 122A-2.

Debtor 1
Debtor 2

Case 23-42432

Doc 1

Filed 12/21/23

Entered 12/21/23 12:33:26

Desc Main

Terrence

Peter

Martin

Jinja

Delight

Martin

First Name

Middle Name

Last Name

Document Page 89 of 110

Case number (if known) _____

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X

/s/ Terrence Peter Martin

Signature of Debtor 1

Date 12/21/2023

MM/ DD/ YYYY

X

/s/ Jinja Delight Martin

Signature of Debtor 2

Date 12/21/2023

MM/ DD/ YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Debtor 1
Debtor 2

Additional Page For 122A-1

10. Cont.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
Income From Arthur James and Mary Cotten Testamentary Trust		\$495.08
IRA from her Dad's estate		\$2,500.00

In re: **Martin, Terrence Peter (Debtor 1)**
Martin, Jinja Delight (Debtor 2)

Case Number:
 Chapter: **7**

Martin, Terrence Peter (Debtor 1)

2023	Year-to-date Gross Income	Year-to-date Net
	\$41,600.00	\$34,945.58

December	Month-to-date Gross Income	Month-to-date Net
	\$0.00	\$0.00

No Paychecks Found

November	November 2023 Gross Income	November 2023 Net
	\$0.00	\$0.00

No Paychecks Found

October	October 2023 Gross Income	October 2023 Net
	\$5,600.00	\$4,716.74

10/5/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

10/12/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

10/19/2023 — Tek systems

Regular:	\$1,600.00	<u>Other Deductions:</u>
Total Earnings:	\$1,600.00	
Federal WH Tax	\$119.62	
Medicare Tax	\$23.20	
Social Security Tax	\$99.20	
Net Earnings:	\$1,357.98	

Total for October

Tek systems

Regular:	\$5,600.00	<u>Other Deductions:</u>
Overtime:	\$0.00	
Total Earnings:	\$5,600.00	
Federal WH Tax	\$454.86	
Social Security Tax	\$347.20	
Medicare Tax	\$81.20	
Net Earnings:	\$4,716.74	

September

September 2023 Gross Income
\$8,000.00

September 2023 Net
\$6,717.52

9/7/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

9/14/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

9/21/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

9/28/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

Total for September

Tek systems

Regular:	\$8,000.00	<u>Other Deductions:</u>
Overtime:	\$0.00	
Total Earnings:	\$8,000.00	
Federal WH Tax	\$670.48	
Social Security Tax	\$496.00	
Medicare Tax	\$116.00	
Net Earnings:	\$6,717.52	

August

August 2023 Gross Income
\$10,000.00

August 2023 Net
\$8,396.90

8/3/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

8/10/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

8/17/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

8/24/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

8/31/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

Total for August

Tek systems

Regular:	\$10,000.00	<u>Other Deductions:</u>
Overtime:	\$0.00	
Total Earnings:	\$10,000.00	
Federal WH Tax	\$838.10	
Social Security Tax	\$620.00	
Medicare Tax	\$145.00	
Net Earnings:	\$8,396.90	

July

July 2023 Gross Income
\$8,000.00

July 2023 Net
\$6,717.52

7/6/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

7/13/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

7/20/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

7/27/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

Total for July

Tek systems

Regular:	\$8,000.00	<u>Other Deductions:</u>
Overtime:	\$0.00	
Total Earnings:	\$8,000.00	
Federal WH Tax	\$670.48	
Social Security Tax	\$496.00	
Medicare Tax	\$116.00	
Net Earnings:	\$6,717.52	

June

June 2023 Gross Income
\$10,000.00

June 2023 Net
\$8,396.90

6/1/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

6/8/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

6/15/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

6/22/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

6/29/2023 — Tek systems

Regular:	\$2,000.00	<u>Other Deductions:</u>
Total Earnings:	\$2,000.00	
Federal WH Tax	\$167.62	
Medicare Tax	\$29.00	
Social Security Tax	\$124.00	
Net Earnings:	\$1,679.38	

Total for June

Tek systems

Regular:	\$10,000.00	<u>Other Deductions:</u>
Overtime:	\$0.00	
Total Earnings:	\$10,000.00	
Federal WH Tax	\$838.10	
Social Security Tax	\$620.00	
Medicare Tax	\$145.00	
Net Earnings:	\$8,396.90	

Average for All Paychecks

Tek systems

Regular:	\$1,980.95	<u>Other Deductions:</u>
Overtime:	\$0.00	
Total Earnings:	\$1,980.95	
Federal WH Tax	\$165.33	
Social Security Tax	\$122.82	
Medicare Tax	\$28.72	
Net Earnings:	\$1,664.08	

Martin, Jinja Delight (Debtor 2)

2023

Year-to-date Gross Income
\$41,346.20

Year-to-date Net
\$26,460.18

December

Month-to-date Gross Income
\$0.00

Month-to-date Net
\$0.00

No Paychecks Found

November

November 2023 Gross Income
\$16,538.48

November 2023 Net
\$9,834.89

11/10/2023 — Wells Fargo Bank, NA

Regular:	\$8,269.24	<u>Other Deductions:</u>
Total Earnings:	\$8,269.24	
Federal WH Tax	\$1,241.04	
Medicare Tax	\$110.03	
Social Security Tax	\$470.47	
Voluntary Retirement	\$826.93	
Health Insurance	\$273.78	
Disability Insurance	\$22.40	
Health Savings Account	\$407.14	
Net Earnings:	\$4,917.45	

11/24/2023 — Wells Fargo Bank, NA

Regular:	\$8,269.24	<u>Other Deductions:</u>
Total Earnings:	\$8,269.24	
Federal WH Tax	\$1,241.04	
Medicare Tax	\$110.03	
Social Security Tax	\$470.48	
Voluntary Retirement	\$826.93	
Health Insurance	\$273.78	
Disability Insurance	\$22.40	
Health Savings Account	\$407.14	
Net Earnings:	\$4,917.44	

Total for November

Wells Fargo Bank, NA

Regular:	\$16,538.48	<u>Other Deductions:</u>
Overtime:	\$0.00	
Total Earnings:	\$16,538.48	
Federal WH Tax	\$2,482.08	
Social Security Tax	\$940.95	
Medicare Tax	\$220.06	
Voluntary Retirement	\$1,653.86	
Health Insurance	\$547.56	
Disability Insurance	\$44.80	
Health Savings Account	\$814.28	
Net Earnings:	\$9,834.89	

October

October 2023 Gross Income
\$16,538.48

October 2023 Net
\$11,083.53

10/13/2023 — Wells Fargo Bank, NA

Regular:	\$8,269.24	<u>Other Deductions:</u>
Total Earnings:	\$8,269.24	
Federal WH Tax	\$1,443.65	
Medicare Tax	\$110.03	
Social Security Tax	\$470.47	
Health Insurance	\$273.78	
Disability Insurance	\$22.40	
Health Savings Account	\$407.14	
Net Earnings:	\$5,541.77	

10/27/2023 — Wells Fargo Bank, NA

Regular:	\$8,269.24	<u>Other Deductions:</u>
Total Earnings:	\$8,269.24	
Federal WH Tax	\$1,443.65	
Medicare Tax	\$110.03	
Social Security Tax	\$470.48	
Health Insurance	\$273.78	
Disability Insurance	\$22.40	
Health Savings Account	\$407.14	
Net Earnings:	\$5,541.76	

Total for October

Wells Fargo Bank, NA

Regular:	\$16,538.48	<u>Other Deductions:</u>
Overtime:	\$0.00	
Total Earnings:	\$16,538.48	
Federal WH Tax	\$2,887.30	
Social Security Tax	\$940.95	
Medicare Tax	\$220.06	
Health Insurance	\$547.56	
Disability Insurance	\$44.80	
Health Savings Account	\$814.28	
Net Earnings:	\$11,083.53	

September

September 2023 Gross Income
\$8,269.24

September 2023 Net
\$5,541.76

9/29/2023 — Wells Fargo Bank, NA

Regular:	\$8,269.24	<u>Other Deductions:</u>
Total Earnings:	\$8,269.24	
Federal WH Tax	\$1,443.65	
Medicare Tax	\$110.03	
Social Security Tax	\$470.48	
Health Insurance	\$273.78	
Disability Insurance	\$22.40	
Health Savings Account	\$407.14	
Net Earnings:	\$5,541.76	

Total for September

Wells Fargo Bank, NA

Regular:	\$8,269.24	<u>Other Deductions:</u>
Overtime:	\$0.00	
Total Earnings:	\$8,269.24	
Federal WH Tax	\$1,443.65	
Social Security Tax	\$470.48	
Medicare Tax	\$110.03	
Health Insurance	\$273.78	
Disability Insurance	\$22.40	
Health Savings Account	\$407.14	
Net Earnings:	\$5,541.76	

Average for All Paychecks

Wells Fargo Bank, NA

Regular:	\$8,269.24	<u>Other Deductions:</u>
Overtime:	\$0.00	
Total Earnings:	\$8,269.24	
Federal WH Tax	\$1,362.61	
Social Security Tax	\$470.48	
Medicare Tax	\$110.03	
Voluntary Retirement	\$330.77	
Health Insurance	\$273.78	
Disability Insurance	\$22.40	
Health Savings Account	\$407.14	
Net Earnings:	\$5,292.04	

IN THE UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF TEXAS
SHERMAN DIVISION

IN RE: **Martin, Terrence Peter**
Martin, Jinja Delight

CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 12/21/2023 Signature /s/ Terrence Peter Martin
Terrence Peter Martin, Debtor

Date 12/21/2023 Signature /s/ Jinja Delight Martin
Jinja Delight Martin, Joint Debtor

ADP

c/o Altus Receivable Management
2121 Airline Dr. Ste. 520
Metairie, LA 70001

American Express

Correspondence/Bankruptcy
PO Box 981535
El Paso, TX 79998-1535

Arvest

PO Box 298
Lowell, AR 72745

Ascentium Capital

Depat. 3059
PO Box 11407
Birmingham, AL 35246

Ascentium Capital

Depart. 3059
PO Box 11407
Birmingham, AL 35246

Attorney General of Texas

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Austin, TX 78711-2017

Attorney General of the
United States

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10th & Constitution Ave. N.W.
Washington, DC 20503

BAHA Investment, LLC

c/o Strategic Asset Mgmt. Group, Inc
10620 Treena St. STE. 230
San Diego, CA 92131

Barclays
PO Box 8802
Wilmington, DE 19899-8802

Benetrends, Inc
1684 S. Broad St. Ste. 130
Lansdale, PA 19446

Berkovich & Bouskila PLLC
80 Broad Street Suite 3303
New York, NY 10004

Berkovich and Bouskila
1545 Route 202
Pomona, NY 10970

BMI
10 Music Square East
Nashville, TN 37203

Can Capital Asset Servicing,
Inc
c/o Kathleen O'Connell
1850 Parkway Place SE Ste. 1150
Marietta, GA 30067

Capital One Auto
PO Box 60511
City of Industry, CA 91716

Carmax
PO Box 6045
Carol Stream, IL 60197

Chase
PO Box 15298
Wilmington, DE 19850-5298

Chase Home Mortgage
700 Kansas Lane LA4-6633
Monroe, LA 71203

Citibank
Customer Service
PO Box 6500
Sioux Falls, SD 57117

Citicards/Citibank
PO Box 6004
Sioux Falls, SD 57117

Clinical Pathology Lab.
Po Box 141669
Austin, TX 78714-1669

Comptroller of Public
Accounts
PO Box 12548
Austin, TX 78711-2548

Corporation Service Company
Po Box 2576
Springfield, IL 62708-2576

Credence
1700 Dallas Pkwy. 204
Dallas, TX 75248

Dalfit Alpha, LLC
4576 Belfort Pl Ste. 150
Dallas, TX 75205

Dalfit Alpha, LLC
3232 Mckinney Ave. Ste. 150
Dallas, TX 75204

Dalfit Beta, LLC
4576 Belfort Pl
Dallas, TX 75205

Dalfit Gamma. LLC
4576 Belfort Pl
Dallas, TX 75205

Dalfit Holdings Corporation
4576 Belfort Pl
Dallas, TX 75205

David Fogel, PC
c/o David Fogel
1225 Franklin Ave Ste. 201
Garden City, NY 11530

Eminent Funding LLC
369 Lexington Avenue
New York, NY 10017

Everest Business Funding
102 W. 38th St., 6th FL
New York, NY 10018

Extra Space Storage
4413 NE Loop 820
North Richland Hills, TX 76180

Gaedeke Holdings, II, LTD
c/o McCathern Law
3710 Rawlins Street Ste. 1100
Dallas, TX 75219

Gaedeke Holdings, II, LTD
3710 Rawlins Street Ste. 1100
Dallas, TX 75219

Greg & Tina Sain
701 Kimbro
Lantanna, TX 76226

Internal Revenue Service
Centralized Insolvency Operations
PO Box 7346
Philadelphia, PA 19101-7346

Internal Revenue Service -
Centralized Insolvency Operations
PO Box 7346
Philadelphia, PA 19101-7346

Intuit Financing
c/o Weltman Weinberg & Reis Co., LPA
5000 Bradenton Ave. Ste. 100
Dublin, OH 43017

JDM Holdings, LLC
4576 Belfort Pl
Dallas, TX 75205

JPMorgan Chase
Mail code OH1-1272
PO Box 182223
Columbus, OH 43218

Kemp Smith LLP
6001 W. Palmer Lane Ste. 370-134
Austin, TX 78727

Legendary Vacation Club
Hotel Zone
Blvd. Kulkalcan KM 14.5
Cancun, QR77500

Linebarger, Goggan, Blair &
Sampson, LLP
2777 N Stemmons Fwy Ste 1000
Dallas, TX 75207-2328

Macy's
PO Box 790003
Saint Louis, MO 63179-0003

MidWest Regional Bank
363 Festus Centre Drive, PO Box 1269
Festus, MO 63028-7269

Office of the Attorney General
Bankruptcy-Collections Division
Po Box 12548
Austin, TX 78711-2548

Office of the United States
Trustee
903 San Jacinto Blvd Ste 230
Austin, TX 78701-2450

Omega Optical
13515 N. Stemmons Fwy.
Dallas, TX 75234

Parkland Medical Center
Po Box 732325
Dallas, TX 75373-2325

PEAC formerly Marlin
PO Box 13604
Philadelphia, PA 19101-3604

Peac solutions
300 Fellowship Road
Mount Laurel, NJ 08054

Quest Diagnostics
PO Box 9000
South Windsor, CT 06074-9000

Recovery Solutions Group,
LLC
1008 Mattlind Way
Milford, DE 19963

Richard E. Clark
2401 Founttain View Drive #306
Houston, TX 77057

Ring Central
14675 Dallas Parkway
Dallas, TX 75254

SEC
100 F Street
Washington, DC 20549

Texas Alcoholic Beverage
Commission
License and Permits Division
Po Box 13127
Austin, TX 78711-3127

Texas Attorney General's
Office
Bankruptcy Collection Division
PO Box 12548
Austin, TX 78711-2548

Texas Comptroller of Public
Accounts
PO Box 12548, MC-008
Austin, TX 78711-2548

Texas Comptroller of Public
Accounts
Bankruptcy Section
Po Box 13528
Austin, TX 78711-3528

Texas Workforce Commission
TEC Building Tax Dept.
101 E. 15th Sreet
Austin, TX 78778

Texas Workforce Commission
TEC Building - Bankruptcy
101 E 15th St
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Fort Worth, TX 76102-6600

U.S. Dept. of Veterans Affairs
Regional Office, Finance Section (24)
701 Clay Ave
Waco, TX 76799-0001

U.S. Small Business
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Tyler, TX 75702-0204

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United States Trustee
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